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Giatsi Clausen, M., Nicol, M and Gill, J. 2007. Occupational therapists' perceptions on the academic difficulties preterm children present with in their first years of mainstream schooling. Paper presented at *2nd ISEI conference, The International Society on Early Intervention, 7th International Scientific Conference, Zagreb, June 14-16 2007*, unpublished.

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Occupational therapists' perceptions of preterm children's academic difficulties in the early years of mainstream schooling



PhD Thesis (in progress)
Queen Margaret University, Edinburgh
(Giatsi, M.; Nicol, M.; Gill, J. 2007)

Rationale for the study

- Medical advances in obstetrics and in the care of premature and low- birth- weight infants > survival of children displaying neurodevelopment course that might differ from the one full-term children
- “Healthy” preterm infants missing the opportunity of accessing services; children being “overlooked” until first school years
- School children born prematurely and higher incidence of “failing” academically in many school tasks
- Need to explore the importance of EI services, including occupational therapy

Rationale (continued)

- Infancy of the OT services, lack of information regarding outcome measures, and the limited amount of literature
- ↓
- Need for work of a large scale explorative nature based on occupational therapists professional judgements was needed
 - Lack of formal clinical data that formally inform therapists, useful to investigate thinking processes directing these practitioners to take the best judged action
- !
- Investigation could be a valuable precursor for future enquiries to establish clinical outcomes of occupational therapy intervention

Aims of the study

1. To document the problems/ difficulties healthy children who were born prematurely present within their school performance as reported by occupational therapists
2. To explore assessment procedures, treatment principles and, specific practices that are employed by occupational therapists while working with these children
3. To explore occupational therapists' professional judgements on the clinical significance of occupational therapy intervention for the above population and, investigate how these professionals come to make judgements of such value

Methodology

Mixed methods enquiry: - add credibility and rigour to a study that attempted to cover different research questions
- offer a thick description of the phenomenon of interest by neutralising any bias

Epistemological stance: Pragmatism

Data collection methods: **Survey** (questionnaires)
Online discussion groups
Semi-structured interviews

Why a Survey?

- **New data wanted that are not collected through any other route**
- **Lack of centrally available data**
- **Multiple records in different locations or out-of-date/ incomplete records**
- **Inaccessible records**

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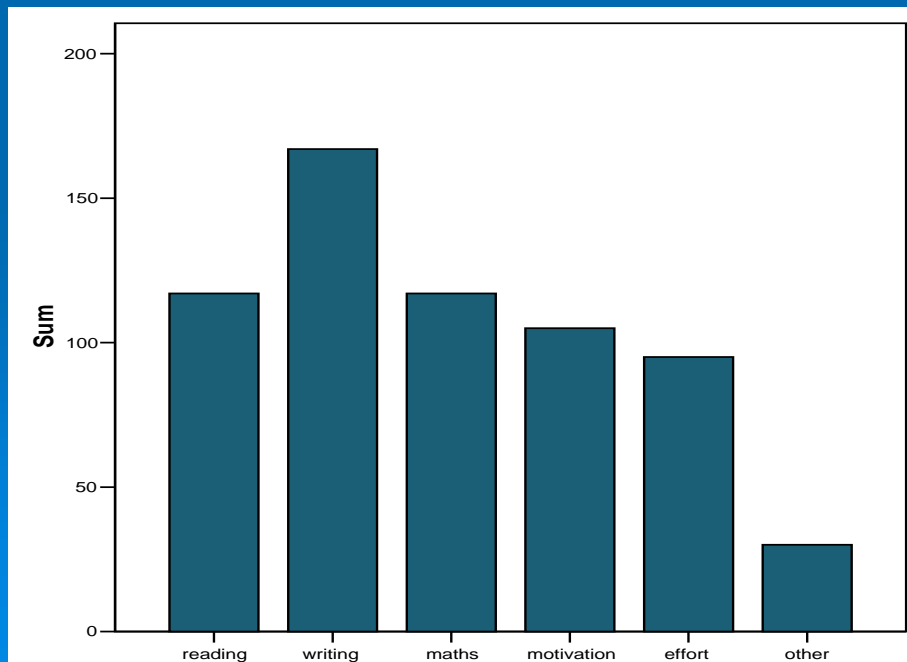
- **UK-based nationwide survey; one thousand (1000) questionnaires**
- **National Association of Paediatric Occupational Therapists (NAPOT)**
- **Inability of NAPOT to distribute reminder letters**
- **Response rate: 35.3%**
- **Analysis: Descriptive statistics**
Exploration of associations between variables
Content Analysis for open-ended responses

Some demographics

- **Approx 95% of respondents: paediatric OTs**
- **Fifteen yrs from graduation; nine years in paediatric services**
- **Vast majority 97.5% female OTs, working in National Health Service (67.9%)**
- **66.3% working with mainstream school children with Specific Learning Difficulties (SLD)**
- **87.7% (of the above) working with mainstream school preterm children with SLD**
- **Final no 192 i.e. more than half of the respondents**

1. Difficulties in Skills & School Performance Areas

- All categories reached a high frequency; sensorimotor (86.2%) and attentional (86.6%) predominant
- Attention difficulties were thought to be the main difficulties associated with poor school performance



School Performance Areas

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Some difficulties reported as common among these children, correlated to certain aspects of school performance

29.4% thought that there are distinct differences between the difficulties full-term and preterm children with SLD present with

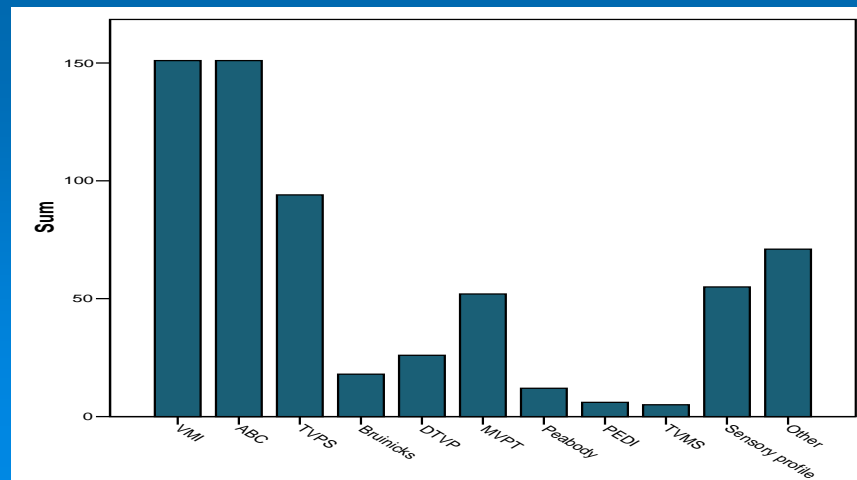
2. Referral, Diagnoses & Previous Interventions

- Community paediatricians (85.4%) and other medics reported as the main detection point and referring discipline
- Age between 6-8ys, distinctive referral age to OT departments; much lower frequencies for all other age zones
- Children thought to only “sometimes”(81.3%) have a SLD diagnosis; DCD and “writing difficulties” identified as the main diagnostic labels
- Terminology regarding diagnoses reported not to be achieving high accuracy standards when used by various professionals (77.4%)

- **Uncertainty about various aspects of previous OT intervention; 41.4% was not aware of any past interventions, mode (frequency) or the reasons for previous intervention**
- **A correlation was found between sensorimotor or perceptual difficulties and being referred to OT at an early stage (under the age of five)**
- **Dyslexia presented a negative correlation to age groups under the 5th year and a positive correlation to the “9 to 10 ys” age group**

3. Assessment

- Broad array of assessment methods: interviews (95.2%), standardised instruments (91.9%) and non-structured observations (95.2%) reached similar frequencies, followed by own developed assessments and structured observations
- VMI and ABC: most popular standardised assessment instruments

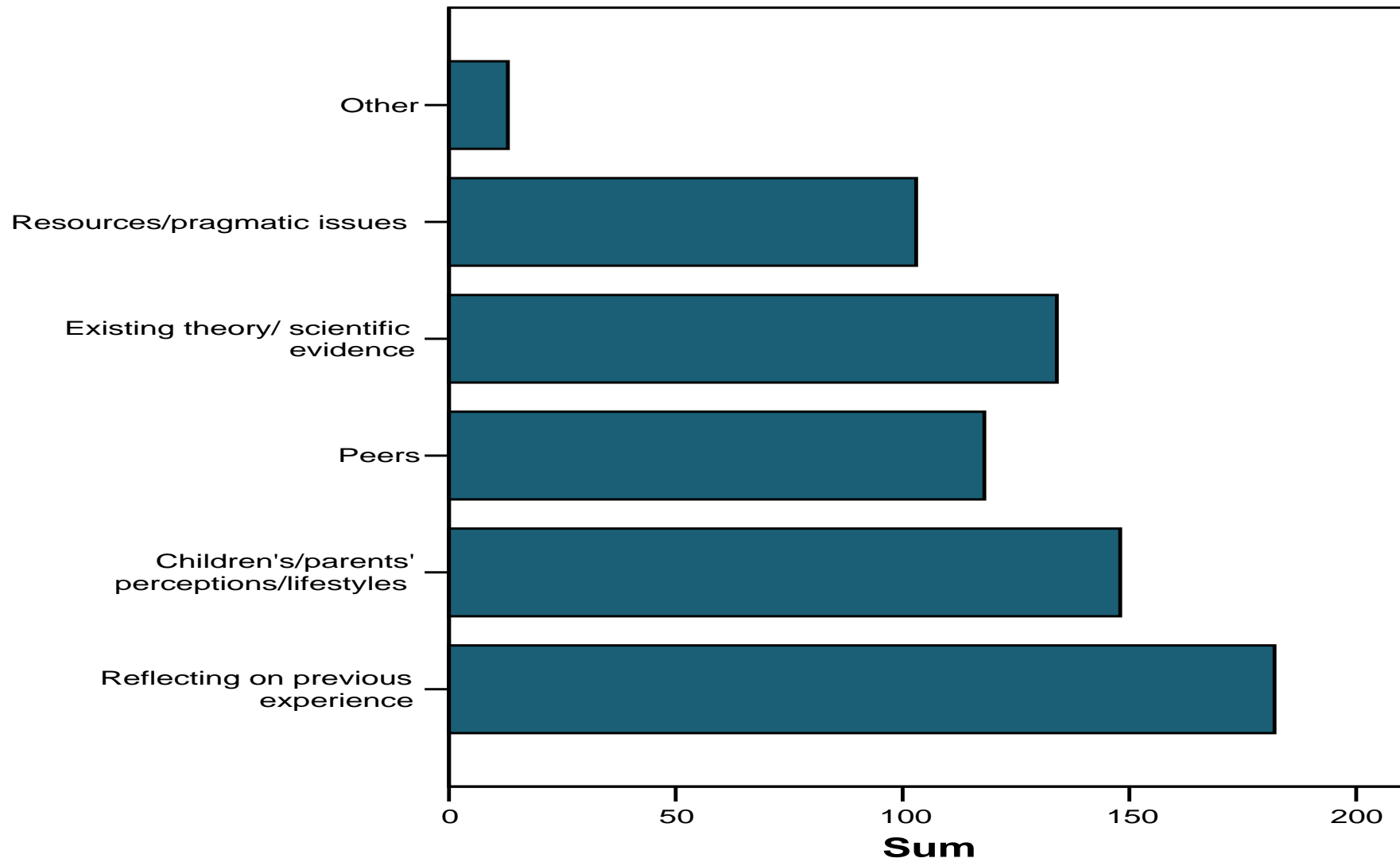


- **Writing: academic curriculum facet of main interest during assessment (97.3%)**
- **Writing was found to relate to standardised assessments**
- **Sensorimotor and perceptual skills were of a focal interest when assessing specific performance components**
- **Talking to parents was identified as particularly important when collecting information about the children (97.3%); medical and school records followed**

4.OT Intervention & Clinical Decision Making

- **Majority: differences between full-term and preterm children with SLD, with regard to goal setting according to majority**
- **SI as main theoretical framework behind intervention (75.3%)**
- **Early onset (91.9%) and interagency collaboration (89.2%) to enhance intervention**
- **Nearly 90% of the respondents agreed on the importance of early OT intervention; justification provided by 83.7%**

- **Justifying the importance of early OT intervention:**
 - Working on prerequisites; neuroplasticity (38%)
 - Educating parents and teachers (27.9)
 - Preventing secondary self confidence issues (27.1%)
 - Assessing children and creating “safety” net (23.3%)
- **Contribution of OT: development of sensorimotor and perceptual skills to enhance later school performance**
- **Combination of factors which inform clinical decision making; complex process**



Summary & Discussion

- Albeit sensorimotor and attention difficulties reaching highest frequencies no particular type of difficulties distinguished
- Writing predominant “problematic” area within academic performance; sensorimotor difficulties correlated to writing
- Development of sensorimotor skills believed to be the main contribution of OTs
- Sensorimotor difficulties and writing associated to standardised screening: the “hen and egg” question!
- Overall uncertainty with regards to medical histories, previous interventions for this group of children

- “Single discipline” (doctors) referral system and the issue of continuity of services
- 6-8 ys: main age zone for referrals; school-associated problems already established?
- “Inconsistency” in the use of terminology: on what ground are referrals made?
- Early identification of academic performance difficulties problematic → importance of “predictability” of early screening

- What about the other 15% of OTs who supported OT intervention but failed to justify it?
 - Lack of evidence
 - Inherent to the profession multi-faceted intervention and difficulty to “pinpoint”
 - Reluctance to provide open-ended responses
- Interim association between what constitutes importance of OT intervention and factors that maximise OT intervention
- Decision making: a complex process
- Importance of the parental role in EI services

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